This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

PART B - FEE(S) TRANSMITTAL

RECEIVE

send this form, together with applicable fee(s), to: Mail Complete of

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

FEB 1 8 2004

MAY 0 5 2004

Alexandria, Virginia 22313-1450 (703) 746-4000

OF <u>EAX</u> (703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required), Blocks 1 through 4 should be completed where appropriate by further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the correspondence address as the public of the correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for the public of the public

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block I)

000027777 7590

02/12/2004

PHILIP S. JOHNSON JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA **NEW BRUNSWICK, NJ 08933-7003**

Note: A certificate of mailing tan only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other secondarnying papers. Each additional paper, such as an assignment or formal drawing, image to some certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUB FREE address above, or being facaintle
transmitted to the USPTO, on the date indicated below.

Jacqueline Pintinics (Signature)

APPLICATION NO.	FILING DATE	· ·	FIRST NAMED INVENTOR	• •	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/003,632	11/02/2001		ChiChang Lee	en entrante	CHOOSE CHOOSE	44-44 4 5152 × 11

TITLE OF ENVENTION: METHODS AND COMPOSITIONS FOR ENHANCED PROTEIN EXPRESSION AND/OR GROWTH OF CULTURED CELLS USING CO-TRANSCRIPTION OF A BCL2 ENCODING NUCLEIC ACID

	• • • • • • • • • • • • • • • • • • • •			<u> </u>	•		<u></u>	<u> </u>
APPLN. TYPB	SMALL ENTITY	13SUE FE	B PUBLICATION FEE	TOTAL PE	3(8) DUB		DATEDUE	<u> </u>
nonprovisional	ÖN	\$1330	\$300	\$16	30		05/12/2004	
EXAM	INËR	ART UNIT	T CLASS-SUBCLASS]				\
OEN, WI	lliam i	2855	073-735000					
1. Change of correspondence CER 1.363).	address or indication of "Fe	= Address" (37	2. For printing on the patent front page, names of up to 3 registered patent at	iist (1) the	1			
Change of corresponde	nce address (or Change of C	: correspondence	agents OR, alternatively, (2) the name firm (having as a member a registered	of a single attorncy or	2	:	:	
	on (or "Foe Address" Indicates more recent) attached. Use		agent) and the names of up to 2 regist attorneys or agents. If no name is listed	ered patent d, no mame	3			· : ; · ·
Number is required.	TINIO ICACINY BINAMICA. CAN	~ ~ ~~~	will be printed.	• • • •				

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

FERASE NOTE: Unless on assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)

(A) NAME OF ASSIGNEE

Malvern, PA

Recorded: 11/02/2001 Ree1/Frame: 012354/0390

Centocor, Inc. Please check the appropriate assignce entegory or entegories (will not be printed on the patent); 🗀 individual Alecorporation or other private group entity □ government 4s; The following fee(s) are englosed: Masue Fee ☐ A check in the amount of the fee(s) is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached. Publication Fee

XII The Director is hearby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 10-0750 (enclose an extra copy of this form). Advance Order - # of Copies

Diffector for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above

uthorized Signature)	10 and 10	(Date)	
برغز لمتشورا	Reg#34.0	33 5/15/70	100
NOTE: The legge Fee and ther than the applicant; a fittest as shown by the rec	Publication Fee (if regul	red) will not be so	cepted from sayone
Strer than the applicant; a	seathered annuals or al	ent or the assistant	so or omer bare w

polices of information is required by 37 CFR 1.311. The information is required to retain a benefit by the public which is to file (and by the USPTO to process) an a Committentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is to take 12 minutes to complete, including gathering, preparing, and submitting the speciation. Commensative is governed by 35 U.S.C. 122 and 37 CFR 1.14. This pollection is estimated to take 12 minutes to complete, including eathering, preparing, and submitting the completed application from to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or subgritions for reducing this bundle, should be sent to the Chief Information Officer U.S. Personner of Commerce, Alexandria, Virginia 22(13-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22(13-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

Under the Panerwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB-control number.

05/05/2004 SMINASS2 00000149 100750 10003632

01 FC:1501 1330.00 DA 02 FC:1504 300.00 DA